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Bib Data Sheet

CONFIRMATION NO. 8967

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|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER 10/733,794 | FILING DATE 12/10/2003 RULE | CLASS 128 | GROUP ART UNIT 3743 | ATTORNEY DOCKET NO. PURIT:66423 |
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/882,200 06/15/2001 PAT 6,675,801
 which is a CON of 09/253,387 02/19/1999 PAT 6,269,812
 which is a CON of 08/818,807 03/14/1997 PAT 5,881,723

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/18/2004

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|--|---|---------------------------|------------------------|----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>ALP</i> Initials | STATE OR COUNTRY CA | SHEETS DRAWING 9 | TOTAL CLAIMS 9 | INDEPENDENT CLAIMS 1 |
|--|---|---------------------------|------------------------|----------------------|----------------------------|

ADDRESS

31625
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 PATENT DEPARTMENT
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 78701-4039

TITLE

Ventilator breath display and graphic user interface

☐ All Fees

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|---|--|--|---|---|--|--------------------------------------|---------------------------------|
| <p>FILING FEE</p> <p>RECEIVED 770</p> | <p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p> | <table border="1"><tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr><tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr><tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr><tr><td><input type="checkbox"/> Other _____</td></tr><tr><td><input type="checkbox"/> Credit</td></tr></table> | <input type="checkbox"/> 1.16 Fees (Filing) | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) | <input type="checkbox"/> 1.18 Fees (Issue) | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Credit |
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